

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Advanced Medical Technology Association Political Action Committee

ADDRESS (number and street)

1200 G St. NW Ste. 400

Check if different  
than previously  
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00340356

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2006

through

09

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kenneth Mendez

Signature of Treasurer

Electronically Filed by Kenneth Mendez

Date

10

13

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Advanced Medical Technology Association Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		17055.37
(b) Cash on Hand at Beginning of Reporting Period .....	13674.42	
(c) Total Receipts (from Line 19) .....	35675.55	93959.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49349.97	111014.97
7. Total Disbursements (from Line 31) .....	31472.60	93137.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	17877.37	17877.37
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Advanced Medical Technology Association Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	26933.35	72033.35
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	592.20	1776.25
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	27525.55	73809.60
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	8150.00	20150.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	35675.55	93959.60
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	35675.55	93959.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	35675.55	93959.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	19000.00	19000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	19000.00	19000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	71665.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	2472.60	2472.60
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	31472.60	93137.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	31472.60	93137.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	35675.55	93959.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35675.55	93959.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19000.00	19000.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19000.00	19000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 26

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) ALCONPAC Mailing Address 6201 South FWY City State Zip Code Forthworth TX 76134 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			Date of Receipt MM / DD / YYYY 07 / 26 / 2006 <b>Transaction ID:</b> 61010.C9 Amount of Each Receipt this Period 2000.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) BAYPAC Mailing Address 100 Bayer Rd. City State Zip Code Pittsburgh PA 15205 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt MM / DD / YYYY 08 / 01 / 2006 <b>Transaction ID:</b> 61010.C22 Amount of Each Receipt this Period 1000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Edwards Lifesciences PAC Mailing Address 1 Edwards Way City State Zip Code Irvine CA 92314 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00			Date of Receipt MM / DD / YYYY 09 / 12 / 2006 <b>Transaction ID:</b> 61010.C48 Amount of Each Receipt this Period 3000.00 Receipt

SUBTOTAL of Receipts This Page (optional) .....

6000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 26

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)

St. Jude Medical PAC

Mailing Address 1 Lillehei PLZ

City State Zip Code  
 St. Paul MN 55117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 6

Transaction ID: 61010.C35

Amount of Each Receipt this Period

2000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

The Congressman Joe Barton Committee

Mailing Address PO Box 1444

City State Zip Code  
 Ennis TX 75120

FEC ID number of contributing  
federal political committee.

**C** C00195065

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 1 / 2 0 0 6

Transaction ID: 61010.C2

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2150.00

**TOTAL** This Period (last page this line number only) .....

8150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Jose Almeida

Mailing Address 12 jeffrey Dr.

City State Zip Code  
 North Attleboro MA 02760

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tyco

Occupation  
President & Ceo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 61010.C4

Amount of Each Receipt this Period

1000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Robin Barber

Mailing Address 13880 Del Sur Street

City State Zip Code  
 San Fernando CA 91340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Precision Dynamics Corp.

Occupation  
VP AMAT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 6

Transaction ID: 61010.C26

Amount of Each Receipt this Period

218.75

Receipt

C. Full Name (Last, First, Middle Initial)

Christopher Begley

Mailing Address 1217 Ashbury Ln.

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hospira

Occupation  
Ceo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 61010.C6

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

3718.75

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Susan Bunning

Mailing Address 6803 Little River Turnpike

City State Zip Code  
 Annandale VA 22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tyco

Occupation  
VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 1 3 / 2 0 0 6

Transaction ID: 61010.C50

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Julie Cantor- Weinberg

Mailing Address 7625 Carteret Rd.

City State Zip Code  
 Bethesda MD 20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 61010.C8

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Nicolas Curtin

Mailing Address 27243 Trinidad Ct

City State Zip Code  
 Valencia CA 91354

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Precision Dynamics Corp.

Occupation  
VPSales & Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 3 / 2 0 0 6

Transaction ID: 61010.C27

Amount of Each Receipt this Period

218.75

Receipt

SUBTOTAL of Receipts This Page (optional) .....

718.75

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ashli Douglas		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 615 25th Street S.		Transaction ID: 61010.C24
City Arlington	State VA	Amount of Each Receipt this Period 500.00
Zip Code 22202		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer St. Jude Medical	Occupation VP Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Ellis		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address 4 Churchill Ln.		Transaction ID: 61010.C28
City Lexington	State MA	Amount of Each Receipt this Period 218.75
Zip Code 02421		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Precision Dynamics Corp.	Occupation VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.75	
<b>C.</b> Full Name (Last, First, Middle Initial) Stuart Essig		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 26 Coinston Ct.		Transaction ID: 61010.C23
City Princeton	State NJ	Amount of Each Receipt this Period 5000.00
Zip Code 08540		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Integra Life Sciences	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		5718.75
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Hosmel Galan		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address 2855 Yucca Dr.		<b>Transaction ID:</b> 61010.C29
City Camarillo	State CA	Zip Code 93010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 218.75
Name of Employer Precision Dynamics Corp.	Occupation VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.75	

Receipt

<b>B.</b> Full Name (Last, First, Middle Initial) Holly Glass		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 2 / 2 0 0 6
Mailing Address 14241 Clubhouse Rd.		<b>Transaction ID:</b> 61010.C47
City Gainesville	State VA	Zip Code 20155
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CR Bard	Occupation VP Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

<b>C.</b> Full Name (Last, First, Middle Initial) Ann Gosier		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 3900 Watson Pl. NW		<b>Transaction ID:</b> 61010.C51
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BD	Occupation VP Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1218.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Shelby Hammerslag

Mailing Address 365 Fox Ridge Dr.

City State Zip Code  
 Thousand Oaks CA 91361

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Precision Dynamics Corp.

Occupation  
VP Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 2 3 / 2 0 0 6

Transaction ID: 61010.C30

Amount of Each Receipt this Period

218.75

Receipt

Full Name (Last, First, Middle Initial)

**B.** Gary Hutchinson

Mailing Address One Cinch

City State Zip Code  
 Bell Canyon CA 91307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Precision Dynamics Corp.

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 2 3 / 2 0 0 6

Transaction ID: 61010.C34

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** Steven LaPierre

Mailing Address 3719 Camelot Dr.

City State Zip Code  
 Annandale VA 22003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Boston Scientific

Occupation  
VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 1 3 / 2 0 0 6

Transaction ID: 61010.C49

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

718.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

A. Full Name (Last, First, Middle Initial)

Edward Ludwig

Mailing Address 605 Piermont Rd.

City State Zip Code

Demarest

NJ

07627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BD

Occupation  
Chairman, President & Ceo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: 61010.C7

Amount of Each Receipt this Period

3000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Ann-Marie Lynch

Mailing Address 5500 Cedar Parkway

City State Zip Code

Chevy Chase

MD

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advamed

Occupation  
EVP Payment & HC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 6

Transaction ID: 61010.C15

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Ann-Marie Lynch

Mailing Address 5500 Cedar Parkway

City State Zip Code

Chevy Chase

MD

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advamed

Occupation  
EVP Payment & HC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 0 / 2 0 0 6

Transaction ID: 61013.C71

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

3200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Ann-Marie Lynch

Mailing Address 5500 Cedar Parkway

City State Zip Code  
 Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Advamed

Occupation  
EVP Payment & HC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61013.C72

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** Richard Meelia

Mailing Address 39 Buckboard Dr.

City State Zip Code  
 Walpole MA 02081

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Tyco

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 61010.C3

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** Niles Noblitt

Mailing Address 21 Lookout Rd.

City State Zip Code  
 Mountain Lakes NJ 07046

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
EBI, LP

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 61010.C5

Amount of Each Receipt this Period

2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

3100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kathy Palmer- Ordonez

Mailing Address 5465 Hilltop Crescent

City State Zip Code  
Oakland CA 94618

FEC ID number of contributing federal political committee.

C

Name of Employer  
Celera DiagnosticsOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 06 / 2006

Transaction ID: 61010.C25

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

B. Oswaldo Penuela

Mailing Address 28545 Rock Canyon Pl.

City State Zip Code  
Saugus CA 91350

FEC ID number of contributing federal political committee.

C

Name of Employer  
Precision Dynamics Corp.Occupation  
VP Intellectual Property

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y  
08 / 23 / 2006

Transaction ID: 61010.C31

Amount of Each Receipt this Period

218.75

Receipt

Full Name (Last, First, Middle Initial)

C. Mark Segal

Mailing Address 12956 Brentwood Ter

City State Zip Code  
Los Angeles CA 90049

FEC ID number of contributing federal political committee.

C

Name of Employer  
Precision Dynamics Corp.Occupation  
VP Finance & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y  
08 / 23 / 2006

Transaction ID: 61010.C32

Amount of Each Receipt this Period

218.75

Receipt

SUBTOTAL of Receipts This Page (optional) .....

5437.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kalyna Snylyk		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address 22504 Calipatria		<b>Transaction ID:</b> 61010.C33
City Calabasas	State CA	Zip Code 91302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 218.75
Name of Employer Precision Dynamics Corp.	Occupation Director, Global RAQA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.75	

Receipt

<b>B.</b> Full Name (Last, First, Middle Initial) Steven Ubl		Date of Receipt M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 1900 Massachusetts		<b>Transaction ID:</b> 61010.C20
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Advamed	Occupation President & Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Receipt

<b>C.</b> Full Name (Last, First, Middle Initial) Steven Ubl		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 1900 Massachusetts		<b>Transaction ID:</b> 61013.C81
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Advamed	Occupation President & Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

718.75

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Steven Ubl Mailing Address 1900 Massachusetts City State Zip Code McLean VA 22101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Advamed Occupation President & Ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61013.C82 Amount of Each Receipt this Period 250.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) Les Vinney Mailing Address 85 W. Juniper Ln. City State Zip Code Moreland Hills OH 44022 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Steris Corp. Occupation President & Ceo Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 61010.C10 Amount of Each Receipt this Period 2000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) Frank Wilton Mailing Address 1200 G Street NW Ste 250 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Advamed Occupation Vice President of Membership S Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 177.80		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 61010.C21 Amount of Each Receipt this Period 44.45 Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2294.45

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Frank Wilton			Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address 1200 G Street NW Ste 250			<b>Transaction ID:</b> 61013.C83	
City State Zip Code Washington DC 20005		Amount of Each Receipt this Period 44.45		
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Advamed		Occupation Vice President of Membership S		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.25		
<b>B.</b> Full Name (Last, First, Middle Initial) Frank Wilton			Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 1200 G Street NW Ste 250			<b>Transaction ID:</b> 61013.C84	
City State Zip Code Washington DC 20005		Amount of Each Receipt this Period 44.45		
FEC ID number of contributing federal political committee. C		Receipt		
Name of Employer Advamed		Occupation Vice President of Membership S		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.70		

**SUBTOTAL** of Receipts This Page (optional) .....

88.90

**TOTAL** This Period (last page this line number only) .....

26933.35

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** BAMPAC

Mailing Address 10 G Street NE Ste 470

City  
Washington

State  
DC

Zip Code  
20002-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61010.E2

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Chocola for Congress

Mailing Address PO Box 6728

City  
South Bend

State  
IN

Zip Code  
46601-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61010.E8

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Diana Degette

Mailing Address P.O. Box 61337

City  
Denver

State  
CO

Zip Code  
80206-

Purpose of Disbursement

Candidate Name  
DIANA L DEGETTE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: CO District: 01

**Transaction ID:** 61010.E15

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

## **A. Ensign for Senate**

Mailing Address PO Box 26568

City  
Las Vegas

State  
NV

Zip Code  
89126-

Purpose of Disbursement

Candidate Name  
JOHN ERIC ENSIGN

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 00

Transaction ID: 61010.E9

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. Friends of Lois Capps**

Mailing Address PO Box 23940

City  
Santa Barbara

State  
CA

Zip Code  
93121-

Purpose of Disbursement

Candidate Name  
LOIS G CAPPs

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 23

Transaction ID: 61010.E14

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Grassley Committee Inc.**

Mailing Address PO Box 1000

City  
Des Moines

State  
IA

Zip Code  
50304-

Purpose of Disbursement

Candidate Name  
CHARLES E GRASSLEY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 00

Transaction ID: 61010.E4

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Jon Kyle for US Senate

Mailing Address PO Box 10246

City  
Phoenix

State  
AZ

Zip Code  
85064-

Purpose of Disbursement

Candidate Name  
JON L KYL

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 00

**Transaction ID: 61010.E12**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Melissa Bean for Congress

Mailing Address PO Box 3068

City  
Barrington

State  
IL

Zip Code  
60010-

Purpose of Disbursement

Candidate Name  
MELISSA LUBURICH BEAN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 08

**Transaction ID: 61010.E5**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Michael Burgess for Congress

Mailing Address PO Box 2334

City  
Denton

State  
TX

Zip Code  
76202-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 61010.E16**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Nancy Johnson for Congress

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-1986

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 61010.E18**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Nathan Deal for Congress

Mailing Address PO Bx 902

City  
Gainesville

State  
GA

Zip Code  
30503-

Purpose of Disbursement

Candidate Name  
NATHAN DEAL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 09

**Transaction ID: 61010.E21**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Northstar Leadership PAC

Mailing Address PO Box 28754

City  
St. Paul

State  
MN

Zip Code  
55128-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 61010.E10**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 26

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** The Richard Burr Committee

Mailing Address PO Box 5928

City  
Winston Salem

State  
NC

Zip Code  
27113-

Purpose of Disbursement

Candidate Name  
RICHARD M BURR

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 00

**Transaction ID: 61010.E3**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** VINEPAC

Mailing Address 607 14th Street NW Ste

City  
Washington

State  
DC

Zip Code  
20005-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 61010.E11**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

19000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Bachman for Congress

Mailing Address PO Box 49756

City State Zip Code  
Blaine MN 55449-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61010.E20

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 28 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Dave Camp for Congress 2006

Mailing Address 5915 Eastman Ave. Ste 100

City State Zip Code  
Midland MI 48640-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61013.E23

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 27 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Dave Camp for Congress 2006

Mailing Address 5915 Eastman Ave. Ste 100

City State Zip Code  
Midland MI 48640-

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61010.E6

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 26 2006

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Friends of Dick Lugar

Mailing Address 47 S. Meridan St Ste 200

City  
Indianapolis

State  
IN

Zip Code  
46204-

Purpose of Disbursement

Candidate Name  
RICHARD G LUGAR

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 00

Transaction ID: 61010.E19

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.** The Congressman Joe Barton Committee

Mailing Address PO Box 1444

City  
Ennis

State  
TX

Zip Code  
75120-

Purpose of Disbursement

Candidate Name  
JOE L BARTON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 06

Transaction ID: 61010.E17

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

10000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Advanced Medical Technology Association Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Friends of John Tanner

Mailing Address 236 Massachusetts Ave. NE Ste 508

City  
Washington

State  
DC

Zip Code  
20002-

Purpose of Disbursement  
GOLF EVENT

Candidate Name  
JOHN S. TANNER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 08

Transaction ID: 61010.E13

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2472.60

In-Kind: Golf Event

**SUBTOTAL** of Disbursements This Page (optional) .....

2472.60

**TOTAL** This Period (last page this line number only) .....

2472.60